Complete Summary

TITLE

Preoperative evaluation: percentage of patients with a preoperative health history and physical examination completed prior to the day of scheduled procedure.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Preoperative evaluation. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Jul. 32 p. [20 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the <u>Measure Validity</u> page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of patients with a preoperative health history and physical examination completed prior to the day of scheduled procedure.

RATIONALE

The priority aim addressed by this measure is to obtain complete preoperative history and physical examination.

PRIMARY CLINICAL COMPONENT

Elective surgery; preoperative health history and physical examination

DENOMINATOR DESCRIPTION

Total number of patients (age two and older) having elective low-risk surgery (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Number of patients having documentation of preoperative history and physical examination prior to the day of the scheduled procedure

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

 A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

Preoperative evaluation.

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

TARGET POPULATION AGE

Age greater than or equal to 2 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients (age two and older) having elective low-risk surgical procedures

Patients who have had a low-risk elective surgery within the preceding month can be randomly sampled to produce a list of at least 20 records for review. Selected records are audited using a check-list tool to determine whether all components of the assessment detailed in the guideline (refer to the National Guideline Clearinghouse [NGC] summary of the Institute for Clinical Systems Improvement [ICSI] guideline Preoperative Evaluation) were documented in the chart prior to the scheduled surgical date.

Data can be collected monthly.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Total number of patients (age two and older) having elective low-risk surgery*

Exclusions

High-risk procedures, such as cardiac or procedures anticipated to be prolonged (usually greater than two hours), are not included.

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of patients having documentation of preoperative history and physical examination prior to the day of the scheduled procedure

^{*}Elective low-risk surgery includes planned, scheduled, non-emergent surgical procedures that allow time for a scheduled preoperative health assessment.

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Episode of care

DATA SOURCE

Administrative data Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Identifying Information

ORIGINAL TITLE

Increase the percentage of patients with a preoperative health history and physical examination completed prior to the day of scheduled procedure.

MEASURE COLLECTION

Preoperative Evaluation Measures

DEVELOPER

Institute for Clinical Systems Improvement

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Sep

REVISION DATE

2008 Jul

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Institute for Clinical Systems Improvement (ICSI). Preoperative Evaluation. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 Jul. 33 p.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Preoperative evaluation. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Jul. 32 p. [20 references]

MEASURE AVAILABILITY

The individual measure, "Increase the Percentage of Patients with a Preoperative Health History and Physical Examination Completed Prior to the Day of Scheduled Procedure," is published in "Health Care Guideline: Preoperative Evaluation." This

document is available from the <u>Institute for Clinical Systems Improvement (ICSI)</u> Web site.

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org

NQMC STATUS

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